Please type a plus sign (+) inside this box->/ + /	
UTILITY	Atty Doc. No. 51964 Total Page 52
PATENT APPLICATION	FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER
TRANSMITTAL	Andreas AUWETER et al.
	Express Mail Label No

a/

b./

Application Elements

Address To: Assistant Commissioner for Patents **Box Patent Application** Washington, D.C. 20231

/Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)

/ Paper Copy (Identical to computer copy)

8./X/ Assignment Papers (cover sheet & document(s) 9./ / 37 CFR 3.73(b)Statement / /Power of Attorney

10./ /English Translation Document (if applicable)

13./X/ Return Receipt Postcard (MPEP 503)

11./ / Information Disclosure / / Copies of IDS Citations

(Should be specifically itemized)

14./ /Small Entity / /Statement filed in prior application Statements Status still proper and desired
15.// Certified Copy of Priority Document(s) (if foreign priority is claimed)

/ Statement verifying identity of above copies

6. / / Microfiche Computer Program (Appendix)

ACCOMPANYING APPLICATIONS PARTS

/ Computer Readable Copy

12./ X / Preliminary Amendment

16./ / Other

1. / X / Fee transmittal Form	
(Submit an original,	and a duplicate for fee processing
2./ X /Specification	Total Pages / /
(Preferred arrangen	nent set for below)

Descriptive title of the Invention

Cross References to Related Application

Statement Regarding Fed. Sponsored R & D

Reference to Microfiche Appendix

Background of the Invention

Brief Summary of the Invention

Brief Description of the Drawings (if filed)

Detailed Description

Claim(s)

Abstract of the Disclosure

3./ / Drawing(s)(35 USC 113)(Figs.) Total Sheets / /

4./ X /Oath or Declaration Total Pages/ 4 /

a /X / Newly executed (original or copy)

/Copy from a prior application (37 CFR 1.63(d)
(For Continuation/Divisional with Box 17 completed)
Note Box 5 below
/ DELETION OF INVENTOR(S)

Signed statement attached deleting inventor(s) named in the prior application see 37 CFR 1.63(d)(2) and 1.33(b).

5. / / Incorporation by reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a

is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
• • • • • • • • • • • • • • • • • • • •

17. If a Continuing Application, check appropriate box and supply the requisite information:						
/ /Continuation	/		1	/ Continuation-in part (CIP)	of prior application No.	
CORRESPONDENCE ADDRESS						

/ Customer N	umber or Bai	r code l	Label
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or / / Correspondence address below

Insert Customer No. or Attach bar code label here

Name:

Herbert B. Keil

KEIL & WEINKAUF

Address:

1101 Connecticut Ave., N.W.

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The filing fee has been calculated as shown below:

	Number	Number	SMALL/LARGE		BASIC FEE
For:	Filed	Extra	ENTITY		\$370./\$740
Basic	: Fee				\$740.00
Total	Claims: 40	x	=	\$ 360.00	
Indep	o. Claims: 3	3 = x	\$42/84	=	\$
[] Mu	ıltiple Depen	dent Claim(s)	=	\$	
[] Non-English specification fee: \$130					\$
[X]A check is enclosed for the filing fee.				=	\$ <u>1100.00</u>

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- [X] A check for \$ 1100.00 for the filing fee.
- [X] The Commissioner is hereby authorized to charge any other fee required, including the issue fee, in connection with the filing and prosecution of this application, and to the extent necessary, applicant(s) hereby petition for extension(s)of time under 37 CFR 1.136, to be charged to our Deposit Account 11-0345.

Respectfully submitted, KEIL & WEINKAUF

Herbert B. Keil Reg. No. 18,967

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